

AL  
2-11-01  
1/29/01  
2/13/01

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	32	1/29
FORMALITY REVIEW	<i>[Signature]</i>	896	2/13/01
RESPONSE FORMALITY REVIEW	<i>[Signature]</i>	571	04/28/01
	<i>[Signature]</i>	901	5-22-01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

BEST AVAILABLE COPY

Claim	Date
Final	
Original	
1	✓ 1/29/01
2	✓
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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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